



COMDTINST 6570.3
16 OCT 1990

COMMANDANT INSTRUCTION 6570.3

Subj: Pharmacy Officer Collateral Duty Responsibilities

1. PURPOSE. This instruction prescribes pharmacy officer collateral duty oversight for clinics and sick bays that do not have a pharmacy officer billet.
2. DIRECTIVES AFFECTED. The contents of this instruction will be incorporated into a future change to COMDTINST M6000.1 (series), Medical Manual.
3. DISCUSSION.
 - a. Current private sector and Department of Defense standards of health care place the operation of pharmaceutical services under the supervision of licensed pharmacists. This oversight is especially important to ensure that the quality, cost effectiveness, and consistency of care is maintained since many Coast Guard clinics operate pharmacies that dispense large numbers of prescriptions written by nonfederal providers.
 - b. Pharmaceutical expenditures in Coast Guard clinics account for up to 70 percent of their operating budget. Efforts must be made to coordinate the rotation of pharmaceuticals between facilities. Limited use, small quantity items must be supplied from a central supply source--thus achieving economies of scale not currently realized.
 - c. Sound management of scarce resources demands that Coast Guard pharmacy officers assume collateral duty oversight which will make maximum use of their professional skills. This will bring their expertise to clinics and sick bays that do not have a pharmacy officer billet.

4. RESPONSIBILITIES.

a. The Commander, Maintenance and Logistics Command (k) shall:

- (1) Determine cost requirements for the pharmacy officer collateral duty program and submit funding requests to Commandant (G-KRM) in the annual Operating Guide Summary of Budget Estimates (CG-4144) process.
- (2) Provide direction and funding to pharmacy officers for matters relating to assignment in the pharmacy officer collateral duty program.
- (3) Develop a work plan which specifies units for which the pharmacy officer is responsible.
- (4) Ensure that visit scheduling will be:
 - (a) the most cost-effective;
 - (b) feasible to maintain responsibilities at the unit where the pharmacy officer billet is assigned; and
 - (c) coordinated with the unit commanding officer possessing the billet.
- (5) Establish the content and frequency of a reporting system for pharmacy officers on assignment and provide a copy of this report to the unit commanding officer where the billet is assigned.
- (6) Ensure that rating officers of pharmacy officers on assignment in the pharmacy officer collateral duty program obtain input for completing the USPHS Commissioned Officers' Effectiveness Report from the other units where the pharmacy officer serves.

b. Pharmacy officers shall:

- (1) Report to the Chief, Health Services Division of the unit to which they are assigned.
- (2) Follow the established chain-of-command.
- (3) Submit a report of the content and frequency established by and for the Commander, Maintenance and Logistics Command (k).

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5. ACTION. Area and district commanders, commanders of maintenance and logistics commands, unit commanding officers, and Commander, Coast Guard Activities Europe shall ensure compliance with the provisions of this instruction.

/s/ MICHAEL HUDGINS
Chief, Office of Health and Safety

Encl: (1) Pharmacy Officer Collateral Duty Responsibilities

PHARMACY OFFICER COLLATERAL DUTY RESPONSIBILITIES

Under the direction of the Commander, Maintenance and Logistics Command (k), pharmacy officers shall:

1. Serve as a member of the Pharmacy and Therapeutics Committee, and assist those units to which they are assigned with developing and maintaining a drug formulary. This formulary shall be standardized to provided a list of medications stocked in a "therapeutic category" format.
2. Establish a quarterly ordering schedule for medications at each unit.
3. Assist each unit in eliminating or minimizing the purchase of medications through nonfederal sources by using the formulary process and redistributing medications as needed.
4. Develop an inventory of limited use medications for distribution to each unit.
5. Serve as the point of contact for redistribution of medications due to expiration date or excess supply.
6. Identify special order medications, label them for each patient and assure that they are not considered formulary items. These should be marked for a specific patient only and removed when that patient no longer requires them.
7. Analyze and develop the most cost effective method for providing non-formulary medications for chronic conditions.
8. Implement a system of written patient information and instructions to be used by all providers of care concerning indications, warnings and adverse reactions for commonly prescribed medications.
9. Provide oversight to the health services technician(s) who normally operate the unit pharmacy and assist in dispensing operations as required.
10. Provide and document in-service training to clinic staff.
11. Review all pharmacy operations and policies including controlled substance activities.
12. Assist the unit in preparation for MLC Quality Assurance Surveys.
13. Submit a report of the content and frequency established by and for the Commander, Maintenance and Logistics Command (k).